

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000004838 (7)**

1. Corporation Name

JAMAICA NATIONAL OVERSEAS (NY) INC.



Principal Place of Business 3895 NW 24TH ST LAUDERDALE LAKES FL 33313 US	Mailing Address 111 NORTH WEST 183RD STREET, SUITE 108 NORTH MIAMI FL 33169 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/05/1995	
21 Suite, Apt. #, etc.		26 3895 NW 24th ST		4. FEI Number 11-3050019	Applied For Not Applicable
22 City & State		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State		28 LAUDERDALE LAKES, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 33311	Country	29 33311	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BUCHANAN, HUGH 4764 NORTH WEST 6TH STREET PLANTATION FL 33317				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	1.1 TITLE	
NAME	REYNOLDS, LANCELOT F	1.2 NAME	
STREET ADDRESS	32 NORBROOK ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	KINGSTON 8, JAMAICA	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	PATTERSON, D A	2.2 NAME	
STREET ADDRESS	4 SHERBOURNE HEIGHTS	2.3 STREET ADDRESS	
CITY-ST-ZIP	KINGSTON, JAMAICA	2.4 CITY-ST-ZIP	
TITLE	TMDs	3.1 TITLE	
NAME	SHARPE, R	3.2 NAME	
STREET ADDRESS	112-01 QUEENS BLVD. APT. 26	3.3 STREET ADDRESS	
CITY-ST-ZIP	FOREST HILLS NY	3.4 CITY-ST-ZIP	
TITLE	AM	4.1 TITLE	
NAME	BARTLETT, CARMEN	4.2 NAME	
STREET ADDRESS	2D EDAM DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	KINGSTON 8 JAMAICA W.I.	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Carmen Bartlett

CARMEN BARTLETT

6/9/98 (954) 676 5755

CR2E034 (10/97)